



PTO/SB/83 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/483,182
Filing Date	January 13, 2000
First Named Inventor	Li-Wen Chen
Art Unit	3624
Examiner Name	Ella Colbert
Attorney Docket Number	52719.00008

To: Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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OCT 17 2003

GROUP 3600

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are: Client has requested that this patent application be transferred to another law firm.

CORRESPONDENCE ADDRESS

1. The correspondence address is NOT affected by this withdrawal.
2. Change the correspondence address and direct all future correspondence to:

Customer Number

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Charlie Kulas			
Address	Carpenter and Kulas, L.L.P.			
Address	1900 Embarcadero Road, Suite 109			
City	Palo Alto	State	CA	ZIP
Country	USA			
Telephone	650-842-0300	Fax	650-842-0304	
<input checked="" type="checkbox"/> This request is made on behalf of myself and <input checked="" type="checkbox"/> all the attorneys/agents of record, <input type="checkbox"/> the attorneys/agents (with registration numbers) listed on the attached paper(s), or <input type="checkbox"/> the attorneys/agents associated with Customer Number 				

This request is enclosed in triplicate (including any attachments).

Name	Aaron Wininger, Reg. No. 45,229 Squire, Sanders & Dempsey, L.L.P. 600 Hansen Way Palo Alto, CA 94304-1043
Signature	
Date	October 10, 2003

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/21 (08-03)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/483,182
		Filing Date	January 13, 2000
		First Named Inventor	Li-Wen Chen
		Art Unit	3624
		Examiner Name	Ella Colbert
Total Number of Pages in This Submission	4	Attorney Docket Number	52719.00008

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> with RCE	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Request for Status of Application
<input type="checkbox"/> Extension of Time Request (in duplicate)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent (in triplicate)
<input checked="" type="checkbox"/> Return Postcard	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Aaron Wininger, Reg. No. 45,229 Squire, Sanders & Dempsey, L.L.P. 600 Hansen Way Palo Alto, CA 94304-1043
Signature	
Date	October 10, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Aaron Wininger		
Signature		Date	October 10, 2003

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